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## UTILITY PATENT APPLICATION TRANSMITTAL

Attomey Docket No. TI-27730A.1A

First Named Inventor or Application Identifier James T. Aslanis, et al.

Title Frame Synchronization in Multicarrier Transmission Systems

APPLICATION ELEMENTS  See MINFEP Chapter 800 concerning utility passed application contents  1.	(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express M	Mail Label No.		EV 053664523 US	0 =		
1.		ntents	1		Box Patent Applicat	tion		
Computer Readable Copy   Computer Copy   Computer Readable Copy   Computer Readable Copy   Copy (dentical to computer copy)   Paper Copy	1. <b>X</b> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)		6.		Microfiche Computer Program (A	ppendix)		
- Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to McOrtiche Appendix - Background of the Invention - Brief Description of the Dischosure - Calaim(s) - Abstract of the Dischosure - Abstract of the Dischosure - Calaim(s) - Abstract of the Dischosure - Abstract of the Dischosure - Abstract of the Dischosure - Answering(s) (35 USC d113) - Trotal Pages - Trotal Page	2 (preferred arrangement set forth below)	18	<sup>]</sup> 7.	Nucle (if ap	eotide and/or Amino Acid Sequence plicable, all necessary)	e Submission C		
- Reference to Microtiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Summary of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Cetain(s) - Calim(s) - Abstract of the Disclosure - AccompanyIng Appellation Decument(s(s)) - And Translation Document (if applicable) - In Information Disclosure - Copies of IDS - Statement (IOS)PTC-1449 - California Disclosure - Copies of IDS - Statement (IOS)PTC-1449 - California Disclosure - Copies of IDS - In Information Disclosure - Copies of IDS - Info	· · · · · · · · · · · · · · · · · · ·			a.	Computer Readable 0	Сору		
- Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description of the Drawings (if filed) - Octained Description of the Drawings (if filed) - Abstract of the Disclosure  3.	1 · · · · · · · · · · · · · · · · · · ·			b.	Paper Copy (identical	to computer copy)		
- Detailed Description - Claim(s) - Abstract of the Disclosure  3.	1			c.	Statement verifying id	lentical of above copies		
Abstract of the Disclosure  3.  X Drawing(s) (35 USC d113)	, , , , , , , , , , , , , , , , , , , ,	ACCOMPANYING APPLICATION PAR						
3.	- Claim(s)		8.		Assignment Papers (cover sheet	& Documents(s))		
a. Newly Executed (original or copy)  a. Newly Executed (original or copy)  b. X Copy from a prior application (37 CFR 1.63(d))  (for continuation/divisional with Box 17 completed)  [Note Box 5 below]  i. DELETION OF INVENTORIS)  Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  5. X Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  15.	3. X Drawing(s) (35 USC d113) [Total Sheets	2	] 9.		` '			
a. Newly Executed (original or copy) b. X Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)  [Note Box 5 below]  i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).  5. X Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, see and to the disclosure of the accompanying application and is hereby incorporated by reference therein.  17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:  Continuation Divisional Continuation-in-part (CIP) of prior application No: 09/193,014.  Prior application information: Examiner: Amanda T. Le Group / Art Unit: 2634  18. CORRESPONDENCE ADDRESS  CITY STATE ZIP CODE  Country Telephone 972/917-5455  FAX 972/917-4418  Registration/No. (Attorney/Agent) 35,190  Signature  11. X Statement (IDS)/PTO-1449 Citations  12. X Preliminary Amendment  12. X Preliminary Amendment  12. X Preliminary Amendment  13. X Isolatement (ICIS)/PTO-1449 Citations  (Should be specifically itemized)  Status still proper and desired  (Should be specifically itemized)  Status still proper and desired  (Proliminary Amendment  14. Statement (ICIS)/PTO-1449  Statement (ICIS)/PTO-1449  Statement (ICIS)/PTO-1449  Citations  15. X Other: Appointment of Powers of Attorney  Appointment of Powers of Attorney  And Revocation of Prior Powers of  Attorney  Anew statement is required to pay small entity less, except  where one has been filed in a prior application No: 09/193,014.  Prior application information: Examiner: Amanda T. Le Group / Art Unit: 2634  18. CORRESPONDENCE ADDRESS  CITY STATE ZIP CODE  COUNTRY STATE  CODE  COUNTRY STATE  CODE  CODE	4. Oath or Declaration [Total Pages	1	<i>]</i> 10.		English Translation Document (if	applicable)		
Incorporation By Reference (useable if Box 4b is checked)   14.	a. Newly Executed (original or copy)		11.	X				
13.		ed)	12.	X	Preliminary Amendment			
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).    Status still proper and desired named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).   Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.   A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.   A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.   A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.   A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application had been shalled to pay small entity fees, except where one has been filed in a prior application No: 09/193,014.   Prior application information: Examiner: Amanda T. Le Group / Art Unit: 2634   Status still proper and desired for the company in the requisition of Prior Powers of Attorney and Revocation of Prior Powers of Attorney and Rev	[Note Box 5 below]		13.	X		503)		
see 37 CFR 1.63(d)(2) and 1.33(b).    See 37 CFR 1.63(d)(2) and 1.33(b).   Certified Copy of Priority Document(s)	l	nventor(s)	14.					
5. X Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.  16. X Other: Appointment of Powers of Attorney and Revocation of Prior Powers of Attorney  16. X Other: Appointment of Powers of Attorney  16. X Other: Appointment of Powers of Attorney  16. X Other: Appointment of Powers of Attorney  18. CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:  19. Continuation Divisional Continuation-in-part (CIP) of prior application No: 09/193,014.  19. Prior application information: Examiner: Amanda T. Le Group / Art Unit: 2634  18. CORRESPONDENCE ADDRESS  23494  Or Correspondence address below  NAME  ADDRESS  CITY STATE ZIP CODE  COUNTRY TELEPHONE 972/917-5455 FAX 972/917-4418  Name (Print/Type) Pedro P. Hernandez  Registration No. (Attorney/Agent) 35,190			15		Certified Copy of Priority Docume	ent(s)		
the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.  A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon where one has been filed in a prior application and is being relied upon where one has been filed in a prior application No: 09/193,014.  Prior application information: Examiner: Amanda T. Le Group / Art Unit: 2634  18. CORRESPONDENCE ADDRESS  Customer Number or Bar Code Label  NAME  ADDRESS  CITY STATE ZIP CODE COUNTRY TELEPHONE 972/917-5455  FAX 972/917-4418  Name (Print/Type) Pedro P. Hernandez  Registration No. (Attorney/Agent) 35,190	The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as			X	015	ers of Attorney		
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Prior application information: Examiner: Amanda T. Le Group / Art Unit: 2634  18. CORRESPONDENCE ADDRESS  Customer Number or Bar Code Label  ADDRESS  CITY  STATE  COUNTRY  STATE  TELEPHONE  972/917-5455  Registration/No. (Attorney/Agent)  Signature  Date	17. If a CONTINUING APPLICATION, check appropriate bo	ox and supp						
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Customer Number or Bar Code Label  NAME  ADDRESS  CITY STATE ZIP CODE COUNTRY TELEPHONE 972/917-5455  Name (Print/Type) Pedro P. Hernandez Registration No. (Attorney/Agent) 35,190  Signature Date								
Customer Number or Bar Code Label  NAME  ADDRESS  CITY STATE ZIP CODE COUNTRY  TELEPHONE 972/917-5455  FAX 972/917-4418  Name (Print/Type)  Pedro P. Hernandez  Registration No. (Attorney/Agent)  Signature  Date	18. CORF	ESPOND	ENCE A	DDRE	SS	<del></del>		
ADDRESS         ZIP CODE           CITY         STATE         ZIP CODE           COUNTRY         TELEPHONE         972/917-5455         FAX         972/917-4418           Name (Print/Type)         Pedro P. Hernandez         Registration No. (Attorney/Agent)         35,190           Signature         Date	Customer Number or Bar Code Label	2349	94		or Correspondence	e address below		
CITY         STATE         ZIP CODE           COUNTRY         TELEPHONE         972/917-5455         FAX         972/917-4418           Name (Print/Type)         Pedro P. Hernandez         Registration No. (Attorney/Agent)         35,190           Signature         Date	NAME							
COUNTRY         TELEPHONE         972/917-5455         FAX         972/917-4418           Name (Print/Type)         Pedro P. Hernandez         Registration No. (Attorney/Agent)         35,190           Signature         Date	ADDRESS					**************************************		
Name (Print/Type)  Pedro P. Hernandez  Registration/No. (Attorney/Agent) 35,190  Signature								
Signature	COUNTRY TELEPHONE	972/917	-5455		FAX	972/917-4418		
	Name (Print/Type) Pedro P. Hernandez		_/	Regi		35,190		
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Patent and Transfer Ark Office: U.S. DEPARTMENT OF COMMERCE

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## **FEE TRANSMITTAL**

Patent fees are subject to annual revision on October 1.
These are the fees effective October 1, 1997
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

Complete If Known							
Application Number	<del> </del>						
Filing Date	02/11/2002						
First Named Inventor	James T. Aslanis, et al.						
Examiner Name							
Group / Art Unit							
Attorney Docket No.	TI-27730A.1A						

TOTAL AMOUNT OF PAYMENT	(\$) 740.00	'ـــــــــــــــــــــــــــــــــــــ	Aπorney	DOCKE	et NO.		11-2773UA. IA	
METHOD OF PAYMENT					FEE (	CALCULATI	ON (continued)	
The Commissioner is hereby authorized to charge to the following Deposit Account,		3.	ADDIT	IONAL	. FEES			
Deposit Account Number	20-0668	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)		Description	Fee Paid
Deposit Account Name Texas Instruments Incorporated		105 127	130 50	205 227	65 25	Surcharge - lat Surcharge - lat cover sheet.	e filing fee e provisional filing fee or	
Charge any additional fee required or credit any overpayment Charge all indicated fees and any additional fee required or credit any overpayment		139	130	139	130	Non-English sp		
, [	1.	147 112	2,520 920*	147 112	2,520 920*	Requesting put	For filing a request for reexamination  Requesting publication of SIR prior to	
Check Money Other		113	1,840*	113	1,840*	Examiner action Requesting put Examiner action	blication of SIR after	
FEE CALC	Order ULATION	115	110	215	55		eply within first month	
		116	400	216	200	Extension of tir	ne within second month	
1. BASIC FILING FEE		117	950	217	475		ne within third month	
Large Entity Small Entity		118	1,510	218	755		ne within fourth month	
Fee Code (\$) Code (\$)  101 790 201 395  106 330 206 165  107 540 207 270  108 790 208 395  114 150 214 75	Fee Description Fee Paid	128	2,060	228	1,030		ne within fifth month	
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101 790 201 395	Utility filing fee \$740	120	310	220	155		support of an appeal	
106 330 206 165	Design filing fee					•		
107 540 207 270	Plant filing fee \$	121	270	221	135	Request for oral hearing		
108 790 208 395	Reissue filing fee \$	138	1,510	138	1,510		tute a pubic use proceeding	9
114 150 214 75	Provisional filing fee \$	140	110	240	55	Petition to reviv	e - unavoidable	-
114 100 214 70	3	141	1,320	241	660	Petition to reviv	ve - unintentional	
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U 2. EXTRA CLAIM FEES		144	670	244	335	Plant issue fee		
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Extra C	laims below Fee Paid						•	
Total Claims 1 -20**= 0	x 18 = 0.00	126	240	126	240	Submission of	Information Disclosure Stm	11.
Independent 1 -3** = 0	x 84 = 0.00	581	40	581	40 Recording each patent assignment per properly (time number of properties)			
Claims Multiple Dependent		146 790 246 395 Filing a submission after final rejection (37 CFR 1.129(a))			7			
		149	790	249	395	For each additi	onal invention to be CFR 1.129(b))	
** or number previously paid, if greater; For h	Reissue, see below							
Large Entity Small Entity Fee Fee Fee Fee	Fee Description	ĺ						
Code (\$) Code (\$)	,	ĺ						
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109 82 209 41	**Reissue independent claims over	041-		:e s				
110 22 210 11	original patent **Reissue claims in excess of 20 and over	Other fee (specify)				L		
original patent								
	SUBTOTAL (2) (\$)0	*Redu	ced by Ba	sic Filing	Fee Paid	i .	SUBTOTAL (3)	0.00
SUBMITTED BY							Complete (if appl	licable)
Typed or Printed Name	Pedro P. Hernandez	,					Reg. Number	35,190
Signature	1 PP Xb	_//		Date			Deposit Account User ID	